

Work Order ID 96243

96243

Page 1

January-25-13 9:23:07 AM

Item ID: D4728-045

Revision ID:

Item Name: LH Cabin Speaker #3

Start Date: 1/16/13

Start Qty: 2.00

Required Date: 2/08/13

Req'd Qty: 2.00

Reference:

Accept

N900040100

Setup Start

NS1

Stop

NS2

Cust Item ID:

Customer:

Approvals:

Process Plan: MLJ

Date: 13-01-25

Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start

NR1

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D4728	A								

110

0.00

110

Outsource8

Memo

0.00

Outsource process- Eagle

Issue P/O to Eagle

Manufacture as per dwg

Certificate of conformity required

120

Receive & Inspect for Damage & Mat'l Certs

0.00

120

Packaging

Memo

0.00

Packaging

Inspect and check certificate of conformity

130

QC4- 100% Inspect kits for completeness

0.00

130

QC

Memo

0.00

Quality Control

DAS

27

9-89

13916

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General		
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset	<input type="checkbox"/> Other
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration	
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence	
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions	

Work Order ID 96243***96243***

Page 2

January-25-13 9:23:07 AM

Item ID: D4728-045 Accept ***N900040100*** Setup Start ***NS1***
Revision ID: Stop ***NS2***
Item Name: LH Cabin Speaker #3
Start Date: 1/16/13 Start Qty: 2.00 ***2*** Cust Item ID:
Required Date: 2/08/13 Req'd Qty: 2.00 ***2*** Customer:
Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
140	Identify as per dwg & Stock Location: _____	0.00							
140									
Packaging	Memo	0.00				2X	28	13-09-16	
Packaging									
150	QC21- Final Inspection - Work Order Release	0.00							
150									
QC	Memo	0.00							
Quality Control									

MC5 13-09-17

13-09-17

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION <div style="display: flex; justify-content: space-around;"> <div style="text-align: right;"> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> </div> <div style="text-align: right;"> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div style="text-align: right;"> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div style="text-align: right;"> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div style="text-align: right;"> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>							
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Picklist Print

January-25-13 9:23:06 AM

Page 1

Work Order ID: 96243

Parent Item: D4728-045

Parent Item Name: LH Cabin Speaker #3

Start Date: 1/16/13

Required Date: 2/08/13

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP REV:A 12.11.09 NEW ISSUE DD VERF:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D4728-045P LH Cabin Speaker #3		Purchased	No				Each	0.0000		2		1/23/13	2

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

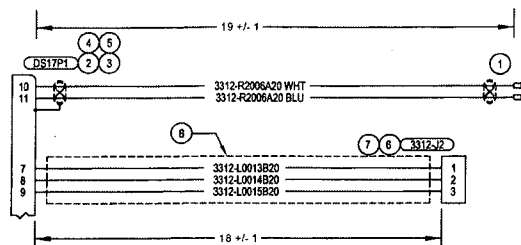
Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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LIST OF MATERIALS				
QTY PER	ITEM	PART NUMBER	DESCRIPTION	SUPPLIER
	2	1	640911-1	TERMINAL
	1	2	M24308/4-2Z	CONNECTOR
A/R (5)		3	M39029/64-369	CONTACTS
	1	4	M85049/48-2-2F	BACKSHELL
	1	5	M24308/26-1F	JACKSCREW KIT
	1	6	1-480303-0	CONNECTOR
	A/R (3)	7	60617-1	CONTACTS
	A/R (18)	8	XPFI-1/4	EXPANDABLE SLEEVING
				EDMO



D4728-045 LH CABIN SPEAKER #3

NOTES:

- ALL NEW UNSHIELDED WIRE USE M22759/41-xx-9 TYPE WIRE UNLESS OTHERWISE SPECIFIED (M22759/41-XX-X IS NOT INTENDED TO BE USED IN SOLDER APPLICATIONS, SOLDERABILITY CAN BE ACHIEVED WITH THE PROPER SOLDER, USE CRIMP SPLICES FOR REPAIR).
- ALL NEW TWISTED SHIELDED CABLE USE M27500-xxTGxT14 TYPE CABLE UNLESS OTHERWISE SPECIFIED.
- ALL WIRES 20 AWG UNLESS OTHERWISE SPECIFIED.
- IDENTIFY/COOE ALL WIRES AND CABLES IN ACCORDANCE WITH 39-A-AWDP-00-X WIRING DATA PUBLICATION.
- KEEP ALL JUMPERS, LOGIC STRAP, POWER, CHASSIS AND SIGNAL GROUND WIRES AS SHORT AS POSSIBLE.
- ALL TERMINALS TO BE INSTALLED IN ACCORDANCE WITH 39-A-AWDP-00-X WIRING DATA PUBLICATION.
- ALL ELECTRICAL GROUNDING AND BONDING TO BE INSTALLED IN ACCORDANCE WITH 39-A-AWDP-00-X WIRING DATA PUBLICATION.
- ALL CONNECTORS TO BE INSTALLED IN ACCORDANCE WITH 39-A-AWDP-00-X WIRING DATA PUBLICATION.
- ENSURE ALL UNUSED CONNECTOR CONTACTS ARE FILLED WITH SPARE PINS/sockets OR PLASTIC GROMMET SEALING PLUGS.
- A DOT (•) BEFORE A CONNECTOR CONTACT LETTER DENOTES LOWER CASE.
- UNITS: INCHES UNLESS OTHERWISE NOTED.
- IDENTIFY CONNECTORS WITH SHRINK SLEEVE LABELS.

UNCC
SUBJ
WIRING
NO. 96243 MLC
13-01-25

RELEASED
2012-11-05

DESIGN	<i>DES</i>	DART AEROSPACE LTD	
DRAWN	<i>DES</i>	HAWKESBURY, ONTARIO, CANADA	
CHECKED	<i>KB</i>	DRAWING NO.	REV. A
MFG. APPR.	<i>CL</i>	D4728	SHEET 5 OF 15
APPROVED	<i>[Signature]</i>	TITLE	SCALE
DE APPR.	<i>[Signature]</i>	UTILITY INTERIOR WIRING HARNESS	NTS
DATE	12.09.26	COPYRIGHT © 2012 BY DART AEROSPACE LTD	
THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.			

Eagle Copters Maintenance Ltd

823 McTavish Rd, NE
Calgary, Alberta T2E 7G9
Canada

Packing Slip

September 12, 2013

Telephone: (403) 250-7370

Fax: (403) 250-7110

Shipment number: SH#13-002810
Customer PO number: PO20444

Ship To: Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Canada

Phone: (613)632-5200

Ship Via: FED EX
Carrier Terms:

Waybill: 796671258543
Customer PO number: PO20444

Item	Part Number	Part Description	Current Location	Qty UOM	Serial Number	Lot Number
7	D4728-044P	RH CABIN SPEAKER #2	Shipping Area	1 Each		LT-13-013153.1
Type of sale: Outright						
Sales Order Number: SO13-01247.007				Eagle PO Number:		
P1 Attn: Michael Gregoire						
8	D4728-044P	RH CABIN SPEAKER #2	Shipping Area	1 Each		LT-13-013176.1
Type of sale: Outright						
Sales Order Number: SO13-01247.008				Eagle PO Number:		
P1 Attn: Michael Gregoire						
9	D4728-045P	LH CABIN SPEAKER #3	Shipping Area	1 Each		LT-13-013155.1
Type of sale: Outright						
Sales Order Number: SO13-01247.009				Eagle PO Number:		
P1 Attn: Michael Gregoire						
10	D4728-045P	LH CABIN SPEAKER #3	Shipping Area	1 Each		LT-13-013177.1
Type of sale: Outright						
Sales Order Number: SO13-01247.010				Eagle PO Number:		
P1 Attn: Michael Gregoire						
11	D4728-047P	FWD ADVISORY LIGHT	Shipping Area	1 Each		LT-13-013156.1
Type of sale: Outright						
Sales Order Number: SO13-01247.011				Eagle PO Number:		
P1 Attn: Michael Gregoire						
12	D4728-047P	FWD ADVISORY LIGHT	Shipping Area	1 Each		LT-13-013178.1
Type of sale: Outright						
Sales Order Number: SO13-01247.012				Eagle PO Number:		
P1 Attn: Michael Gregoire						

>> denotes that the Packing Slip line item has already been printed.

Work Order Number: 50442

Manufacture Dart Parts

This Work Report forms part of this aircraft's permanent technical records - DO NOT DESTROY.

Item: 5 LH CABIN SPEAKER #3

Squawk: 5.1**Discrepancy:**

Manufacture as per Drawing
D4728-045 Rev A.
Certificate of Conformity
required. B96243

Resolution:

Manufactured IAW Drawing
D4728-045 Rev B and
BHT-ELEC-SPM. Tested
serviceable. Maintenance
release issued.

5.1 Work Done By: Eric Olberg

The maintenance described above has been performed in accordance with the applicable standards of airworthiness.
AMO 6-81 Signature: Ljubomir Jovicic on 9/4/2013

Parts:

Part Number	Description	Serial Number	Lot Number	Condition	Qty
M24308/26-1F	FEMALE SCREW JACK		LT-13-010315	New	8
60617-1	CONTACT		LT-13-010282	New	27

***** Original Maintenance Releases and Independent Control Inspection details are stored electronically at *****
***** Eagle Copters Maintenance Ltd. in Calgary Alberta in the Corridor Software *****

Work Order Number: 50442

Manufacture Dart Parts

This Work Report forms part of this aircraft's permanent technical records - DO NOT DESTROY.

Item: 20 LH CABIN SPEAKER #3

Squawk: 20.1

Discrepancy:

Manufacture as per Drawing
D4728-045 Rev A.
Certificate of Conformity
required. B96243

Resolution:

Manufactured IAW Drawing
D4728-045 Rev B and
BHT-ELEC-SPM. Tested
serviceable. Maintenance
release issued.

20.1 Work Done By: Eric Olberg

The maintenance described above has been performed in accordance with the applicable standards of airworthiness.
AMO 6-81 Signature: Ljubomir Jovicic on 9/4/2013

***** Original Maintenance Releases and Independent Control Inspection details are stored electronically at *****
***** Eagle Copters Maintenance Ltd. in Calgary Alberta in the Corridor Software *****

Eagle Copters Maintenance Ltd
823 McTavish Road, NE Calgary, Alberta T2E 7G9
TCCAAMO Approval No. 6-81
Lot No: LT-13-013188.1



Bin No: STORES

RECEIVED: 09/08/2013 (

Part No: D4728-046P

Description: LH CABIN SPEAKER #3

SERIAL #:

Condition: New

Cure Date:

Manufacturer: Dart Aerospace (Manufacturer)

Model No:

	<u>Cycles</u>	<u>Hours</u>
Total Time:	_____	_____
TSO:	_____	_____
Time Remaining :	_____	_____

Details of work performed/reason for removal

Receiving Inspection

Additional work to be performed upon installation

Eagle Copters Maintenance Ltd
823 McTavish Road, NE Calgary, Alberta T2E 7G9
TCCAAMO Approval No. 6-81
Lot No: LT-13-013177.1



Bin No: STORES

RECEIVED: 09/08/2013 (

Part No: D4728-046P

Description: LH CABIN SPEAKER #3

SERIAL #:

Condition: New

Cure Date:

Manufacturer: Dart Aerospace (Manufacturer)

Model No:

	<u>Cycles</u>	<u>Hours</u>
Total Time:	_____	_____
TSO:	_____	_____
Time Remaining :	_____	_____

Details of work performed/reason for removal

Receiving Inspection

Additional work to be performed upon installation

September 11, 2013

LIC No./Stamp

Inspector

